

|   |  |  |                                       |
|---|--|--|---------------------------------------|
| <p><i>Effective on 12/08/2004.</i><br/><i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2009</h3> |  | <p><b>Complete if Known</b></p>              |                                       |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number<br>10/825,359-Conf. #8104 | Filing Date<br>April 16, 2004         |
| TOTAL AMOUNT OF PAYMENT<br>(\$) 0.00  |  | First Named Inventor<br>GIBSON, Peter        | Examiner Name<br>HOLMES, Rex R.       |
| Art Unit  |  | Art Unit<br>3762                             | Attorney Docket No.<br>22409-00107-US |

**METHOD OF PAYMENT** (check all that apply)

☐ Check   
 ☒ Credit Card   
 ☐ Money Order   
 ☐ None   
 ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account   
 Deposit Account Number: 22-0185   
 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES  |          | SEARCH FEES  |          | EXAMINATION FEES |          | Fees Paid (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|----------------|
|                  | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity     | Fee (\$) |                |
| Utility          | 330          | 165      | 540          | 270      | 220              | 110      |                |
| Design           | 220          | 110      | 100          | 50       | 140              | 70       |                |
| Plant            | 220          | 110      | 330          | 165      | 170              | 85       |                |
| Reissue          | 330          | 165      | 540          | 270      | 650              | 325      |                |
| Provisional      | 220          | 110      | 0            | 0        | 0                | 0        |                |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Small Entity | Fee (\$) |
|--|--------------|----------|
| Each claim over 20 (including Reissues)            | 52           | 26       |
| Each independent claim over 3 (including Reissues) | 220          | 110      |
| Multiple dependent claims                          | 390          | 195      |

|  |  |                               |
|--|--|-------------------------------|
| <b>Total Claims</b><br>- 20 or HP = _____ x _____ = _____                | <b>Extra Claims</b><br>- 3 or HP = _____ x _____ = _____ | <b>Fee Paid (\$)</b><br>_____ |
| HP = highest number of total claims paid for, if greater than 20.        |  |                               |
| <b>Multiple Dependent Claims</b><br>Fee (\$): _____ Fee Paid (\$): _____ |  |                               |
| HP = highest number of independent claims paid for, if greater than 3.   |  |                               |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets   | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--|--------------|--|----------|---------------|
| - 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____ |              |  |          |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) **Fees Paid (\$)**

Other (e.g., late filing surcharge): \_\_\_\_\_

|                     |                    |                                      |                   |
|---------------------|--------------------|--------------------------------------|-------------------|
| <b>SUBMITTED BY</b> |                    |                                      |                   |
| Signature           | /Michael G. Verga/ | Registration No.<br>(Attorney/Agent) | 39,410            |
| Phone               | (202) 331-7111     |                                      |                   |
| Name (Print Type)   | Michael G. Verga   | Date                                 | November 18, 2009 |